



UTILITY PATENT APPLICATION TRANSMITTAL

PTO/SB/05 (03-01)

7/31/2001

J1011 U.S. PTO
09/919050
07/31/01

Attorney Docket No.:	CR00257M	Total Pages:	2
First-Named Inventor or Application Identifier	KARTHIK RAMASUBRAMANIAN		
Title:	METHOD AND SYSTEM FOR TIMING RECOVERY AND DELAY SPREAD ESTIMATION IN A COMMUNICATION SYSTEM		
Express Mail Label No.:	ET275309428US		

(Only for new nonprovisional applications under 37 CFR 1.53(b))

APPLICATION ELEMENTS (see MPEP chapter 600 concerning utility patent application contents)	ADDRESS TO:	Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
---	-------------	--

1.	<input checked="" type="checkbox"/> Fee Transmittal Form <i>in duplicate</i>	
2.	<input checked="" type="checkbox"/> Specification	<i>Total Pages</i> 20
3.	<input checked="" type="checkbox"/> Drawings	<i>Total Sheets:</i> 6
4.	<input checked="" type="checkbox"/> Oath or Declaration with Power of Attorney	<i>Total Pages</i> 3
	a. <input checked="" type="checkbox"/> Newly Executed (original or copy)	
	b. <input type="checkbox"/> Copy from prior application (37 CFR §1.63(d)) (for continuation/divisional with Box 17 completed)	
	i. <input type="checkbox"/> <u>Deletion of Inventor(s):</u> Signed statement attached deleting inventor(s) named in the prior application (see 37 CFR §1.63(d)(2) and 1.33(b))	
5.	<input type="checkbox"/> Incorporation by Reference (<i>useable if Box 4b is checked</i>) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	
6.	<input type="checkbox"/> Application Data sheet. See 37 CFR 1.76	
7.	<input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission	

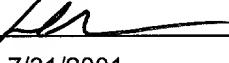
ACCOMPANYING APPLICATION PARTS

8. <input checked="" type="checkbox"/> Assignment Papers (<i>cover sheet and document(s)</i>)			
9. <input type="checkbox"/> 37 CFR §3.73(b) Statement (when there is an assignee)	<input type="checkbox"/>	Power of Attorney	
10. <input type="checkbox"/> English Translation Document (<i>if applicable</i>)			
11. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)Form PTO/SB/08	<input type="checkbox"/>	Copies of IDS Citations	
12. <input type="checkbox"/> Preliminary Amendment			
13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (<i>should be specially itemized</i>)			
14. <input type="checkbox"/> Certified Copy of Priority Document(s)			
15. <input type="checkbox"/> Nonpublication Request Under 35USC 122(b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent			
16. <input type="checkbox"/> Other:			
17. IF A CONTINUING APPLICATION <i>check appropriate box and supply the requisite information below and, if applicable, in a preliminary amendment:</i>			
<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in- Part (CIP)	Prior Appl. No. _____
Prior Appl. information:	Examiner:	Group/Art Unit:	

CORRESPONDENCE ADDRESS

<input checked="" type="checkbox"/> Customer Number or Bar Code Label		<input type="checkbox"/> or <input type="checkbox"/>	Correspondence address below
NAME	Daniel W. Juffernbruch		
	Attorney for Applicant(s)		
Reg. No.	33,122		
ADDRESS	Motorola, Inc. Law Department		
CITY	Schaumburg	STATE	ZIP CODE
COUNTRY	U.S.A.	TELEPHONE	847-538-3129
		FAX	847-576-3750

SUBMITTED BY

NAME	Daniel W. Juffernbruch	Reg. No.	33,122
SIGNATURE			
DATE	7/31/2001	Deposit Account User ID	13-4772

FEE TRANSMITTAL

Patent fees are subject to annual revision

TOTAL AMOUNT OF PAYMENT (\$1,126.00)

Filing fee, issue fee, and other fees are subject to annual revision.

Complete if Known

Application Number

Filing Date

First Named Inventor KARTHIK RAMASUBRAMANIAN

Examiner Name

Group Art Unit

Attorney Docket No. CR00257M

METHOD OF PAYMENT1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:

Deposit Account Number

13-4772

Deposit Account Name

Motorola, Inc.

 Charge Any Additional Fee Required

Under 37 CFR 1.16 and 1.17

 Applicant claims small entity status.

See 37 CFR 1.27

2. Payment Enclosed: Check Credit Card Money Order Other**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity	Small Entity			
Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee Description
105	130	205	65	Surcharge - late filing fee or oath
127	50	227	25	Surcharge - late Provisional filing
139	130	139	130	Non-English specification
147	2520	147	2520	For filing a request for ex parte Reexamination
112	920*	112	920*	Requesting publication of SIR prior to Examiner action
113	1840*	113	1840*	Requesting publication of SIR after Examiner action
115	110	215	55	Extension for reply within first month
116	390	216	195	Extension for reply within second month
117	890	217	445	Extension for reply within third month
118	1390	218	695	Extension for reply within fourth month
128	1890	228	945	Extension for reply within fifth month
119	310	219	155	Notice of Appeal
120	310	220	155	Filing a brief in support of an appeal
121	270	221	135	Request for oral hearing
138	1510	138	1510	Petition to institute a public use proceeding
140	110	240	55	Petition to revive - unavoidable
141	1240	241	620	Petition to revive - unintentional
142	1240	242	620	Utility issue fee (or reissue)
143	440	243	220	Design issue fee
144	600	244	300	Plant issue fee
122	130	122	130	Petitions to the Commissioner
123	50	123	50	Processing fee under 37 CFR 1.17(q)
126	180	126	180	Submission of IDS
581	40	581	40	Recording each patent assignment per property (times number of properties) 40.00
146	710	246	355	Filing a submission after final rejection (37 CFR § 1.129(a))
149	710	249	355	For each additional invention to be examined (37 CFR § 1.129(b))
179	710	279	355	Request for Continued Examination (RCE)
169	900	169	900	Request for expedited examination of a design application

Other fee (specify) _____

2. EXTRA CLAIM FEES

Extra Claims	Fee from below	Fee Paid
Total Claims 32	-20** = 12 X 18 = 216	
Independent 5	-3** = 2 X 80 = 160	

Claims

Multiple Dependent

270 = _____

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 80	202 40	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
109 80	209 40	** Reissue independent
110 18	210 9	claims Over original patent
		**Reissue claims in excess of 20 and over original patent

SUBTOTAL (2)

(\$ 376.00)

* Reduced by Basic Filing Fee paid

SUBTOTAL (3)

(\$ 40.00)

**OR NUMBER PREVIOUSLY PAID, IF GREATER. For Reissues, see above

SUBMITTED BY

Name (Print/Type) Daniel W. Juffernbruch

Registration No. 33,122

Telephone 847-538-3129

Signature 

Mail Date 7/31/2001